

## CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

1.	_	Fast Side Commercial Historic District.			
	ADDD	RESS OF PROPERTY: N. Woter St. Milw. UI 53200			
2.	NAME Name	e AND ADDRESS OF OWNER: (s): Hatlan Sen & Berat Islami			
		ss: 1305 Maclinac Ave			
	City:	8. Wilw State: WI ZIP: 53/72			
	Email:	The Coffeebean 4/4 agricil. Com			
	Teleph	none number (area code & number) Daytime: 4/4-759-036 Evening: Sauce	-breas		
3.	APPLI	ICANT, AGENT OR CONTRACTOR: (if different from owner)			
	Name(s):				
	Address:				
	City:	State: ZIP Code:			
	Email:				
	Teleph	none number (area code & number) Daytime: Evening:			
4.		ATTACHMENTS: (Because projects can vary in size and scope, please call the HPC Office at 414-286-5712 for submittal requirements)			
	Α.	REQUIRED FOR MAJOR PROJECTS:			
	X	. Photographs of affected areas & all sides of the building (annotated photos recommended)			
		Sketches and Elevation Drawings (1 full size and 1 reduced to 11" x 17" or 8 ½" x 11") A digital copy of the photos and drawings is also requested.			
	TENNANO POISTRANO SERVICE CANDINISTA	. Material and Design Specifications (see next page)			
	В.	NEW CONSTRUCTION ALSO REQUIRES:			
		Floor Plans (1 full size and 1 reduced to a maximum of 11" x 17")			
	**************************************	Floor Plans (1 full size and 1 reduced to a maximum of 11" x 17")  Site Plan showing location of project and adjoining structures and fences			

PLEASE NOTE: YOUR APPLICATION CANNOT BE PROCESSED UNLESS BOTH PAGES OF THIS FORM ARE PROPERLY COMPLETED AND SIGNED.

## 5. DESCRIPTION OF PROJECT:

Tell us what you want to do. Describe all proposed work including materials, design, and dimensions. Additional pages may be attached.

New Face on existing Signs.

6. SIGNATURE OF APPLICANT:	
( Xhthe free	
Signature	
Hokan Sen	8/14/15
Please print or type name	Date

This form and all supporting documentation **MUST** arrive by 12:00 noon on the deadline date established to be considered at the next Historic Preservation Commission Meeting. Any information not provided to staff in advance of the meeting will not be considered by the Commission during their deliberation. Please call if you have any questions and staff will assist you.

## Hand Deliver or Mail Form to:

Historic Preservation Commission City Clerk's Office 200 E. Wells St. Room B-4 Milwaukee, WI 53202

PHONE: (414) 286-5722

FAX: (414) 286-3004

www.milwaukee.gov/hpc

Or click the SUBMIT button to automatically email this form for submission.





Customer: Berat & Hakan

Proof Date: 7-9-15

272 N. 12th Street Milwaukee, WI 53233 Phone: 414-273-7446 · Fax: 414-273-7447

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PLEASE CHECK ALL PROOFS FOR SPELLING, PUNCTUATION, AND LAYOUT. Sign-A-Rama will not be held responsible for correcting mistakes for approved artwork.